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Comments:

Atty Docket No: 51471-20016.00
Application Serial No.: 10/549,441
Filed: June 26, 2006
Inventors: David L. SHELTON
Art Unit: 1644
Examiner: R. Schwadron
Title: METHODS FOR TREATING TAXOL-INDUCED GUT DISORDER

Enclosed are the following documents:

1. Transmittal - 1 page
2. Request for Withdrawal as Attorney or Agent and Change of Correspondence Address - 1 page

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PTO/SB/21 (04-07)

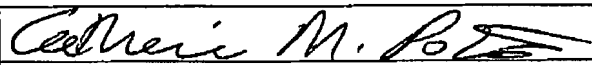
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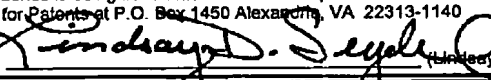
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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/549,441	
	Filing Date	June 26, 2006	
	First Named Inventor	David L. SHELTON	
	Art Unit	1644	
	Examiner Name	R. Schwadron	
Total Number of Pages in This Submission	2	Attorney Docket Number	514712001600

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): 1. Request for Withdrawal as Attorney or Agent and Change of Correspondence Address - 1 page
<div style="border: 1px solid black; padding: 5px; min-height: 40px;"> Remarks </div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP		
Signature			
Printed name	Catherine M. Polizzi		
Date	May 23, 2007	Reg. No.	40,130

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REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/549,441
	Filing Date	June 26, 2006
	First Named Inventor	David L. SHELTON
	Art Unit	1644
	Examiner Name	R. Schwadron
	Attorney Docket Number	514712001600

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Please withdraw me as attorney or agent for the above identified patent application, and

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Country	U.S.A.		
Telephone	(617)551-3223	Email	Nicholas.I.Slepchuk@pfizer.com
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